

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

For Official Use Only

Rec'd  
4519205  
11

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 10162	2. Fiscal Year Covered From 01 / 01 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing. Name LAURENCE R SCANLON JR P.O. Box, Bldg., Room No., if any Street 1625 L ST. NW City WASHINGTON State DC ZIP Code + 4 200365665	4. Name, file number, and address of labor organization. Name AMERICAN FEDERATION OF STATE, COUNTY & MUNICIPAL EMPLOYEES Labor Organization File Number 000-289 P.O. Box, Building and Room Number, if any Street 1625 L ST N.W. City WASHINGTON State DC ZIP Code + 4 200365665
5. Position in labor organization. POLITICAL DIRECTOR	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.

### Signature

**15. Signature and verification.** The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct and complete. (See the section on penalties in the instructions.)

Signed

*Laurence R Scanlon Jr*

On

Aug 14, 2004

Date

202 429 1185

Telephone Number

Name of Person Filing <u>LAWRENCE R. SCANLON JR</u>	File Number U-
---	----------------

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1: a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>STRATEGY GROUP</u></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <u>1603 ORRINGTON AVE</u></p> <p>City <u>EVANSTON</u></p> <p>State <u>IL</u> ZIP Code + 4 <u>60201</u></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p>b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p><u>DIRECT MAIL</u></p>
	<p>11.b. Approximate dollar value of such dealing. <u>0</u></p>
	<p>12.a. Nature of interest held or income received.</p> <p><u>CHEESECAKE</u></p>
	<p>12.b. Amount. <u>35</u></p>

<p>C. <b>Received from any employer</b> (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment</p>

Name of Person Filing <u>LAURENCE R. SCANLON JR</u>	File Number U-
---	----------------

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name if any).  Name <u>WINNING DIRECTIONS</u>  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street <u>1366 SANMATEO AVE</u> City <u>SOUTH SAN FRANCISCO</u> State <u>CA</u> ZIP Code + 4 <u>94080</u>	9. Business deals with:  <input checked="" type="checkbox"/> a. Labor Organization  b. Trust  c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State ZIP Code + 4	11.a. Nature of such dealing. <u>DIRECT MAIL</u>  <hr/> 11.b. Approximate dollar value of such dealing. <u>1,100,000</u> <hr/> 12.a. Nature of interest held or income received. <u>2 Piece jackets</u>  <hr/> 12.b. Amount. <u>86.</u>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State ZIP Code + 4	14.a. Nature of payment.
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

Name of Person Filing <u>LAURENCE R. SCANLON JR</u>	File Number U-
---	----------------

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>LAKE SNELL PERRY HERMAN &amp; ASSOCIATES</u></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <u>1726 M ST NW SUITE 500</u></p> <p>City <u>WASHINGTON DC</u></p> <p>State <u>DC</u> ZIP Code + 4 <u>20036</u></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p>b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p><u>Polling</u></p>
	<p>11.b. Approximate dollar value of such dealing. <u>80,000</u></p>
	<p>12.a. Nature of interest held or income received.</p> <p><u>CHOCOLATES</u></p>
	<p>12.b. Amount. <u>80</u></p>

<p>C. <b>Received from any employer</b> (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment</p>

Name of Person Filing <b><i>LAURENCE R. SCANLON JR</i></b>	File Number U-
--	----------------

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name ***KELLY PRESS INC***

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street ***1701 CABIN BRANCH DRIVE***

City ***Cheverly***

State ***MD*** ZIP Code + 4 ***20785***

9. Business deals with:

☒ a. Labor Organization

b. Trust

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

***PRINTING***

11.b. Approximate dollar value of such dealing. ***5000***

12.a. Nature of interest held or income received.

***1 Dinner***

***1 Lunch***

12.b. Amount. ***181***

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment